

TREATMENT PROTOCOL: RADIOLOGICAL EXPOSURE

1. If radiation is suspected, confirm by using appropriate detection devices
2. If present, identify the cause of the contamination:
 - a. **Internal Radiation** (Radiation Therapy)
 - Begin treatment using appropriate treatment protocol based on complaints
 - Exposure to internal radiation poses low-to-no risk
 - b. **External Radiation**
 - Exposure through a Radiological Dispersal Device (RDD), Radiological Material Release (RMR) or Radiological Exposure Device (RED)
 - Exposure to victims from radiological dispersal devices poses low-to-moderate risk

If External Radiation, proceed with steps 3 through 9:

3. If MCI, begin triage (Ref. No. 519.2, MCI Triage Guidelines)
4. If a RDD is used and in the absence of any other information
 - Evacuate 1,650 feet in all directions from the detonation site
 - Follow the Emergency Response Guidebook for recommended evacuation perimeter zones. ① ②
5. Notify: ③
 - Departmental hazardous materials (HazMat) team, if available
 - Department of Public Health (DPH) Radiation Management at (213) 974-1234, if departmental HazMat team is not available and prolonged exposures are expected
6. **ESTABLISH BASE CONTACT or
IF MCI, CONTACT MEDICAL ALERT CENTER (MAC)**

LIFE THREATENING CONDITION	NOT LIFE THREATENING CONDITION	ASYMPTOMATIC AND MINIMAL EXPOSURE IS SUSPECTED
<ol style="list-style-type: none">7. Treat using appropriate treatment protocol based on complaints8. All patients should be medically stabilized before radiation injuries are considered9. Remove the outer clothing and utilize contamination mitigation techniques before transport. Decontaminate at scene only if it does not delay transport.	<ol style="list-style-type: none">7. Decontaminate using departmental protocols; for extremely large incidents, it may not be necessary to contain the water runoff8. Treat using appropriate treatment protocol based on complaints	<ol style="list-style-type: none">7. Release and issue procedure for home decontamination. Simple external radiological exposure poses low risk.

SPECIAL CONSIDERATIONS

- ① Remember the following principles:
 - Time*: limit time with the victim to a minimum
 - Distance*: the further away from the source, the smaller the dose received.
 - Shielding*: "Turnouts" will protect from alpha and beta emitters, wear respiratory protection if particulate matter (i.e., dust or powder) is present
- ② Continued close exposure of provider for greater than 15 minutes, may require dosimetry and the establishment of dose guidelines.

-
- ③ The HazMat team or DPH Radiation Management will be able to redefine boundaries, establish radiation dose guidelines, assist with monitoring and decontamination procedures, and provide support to on-scene responders.